

PTO/SB/82 (09-03)

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Application Number	10/768,546
Filing Date	January 30, 2004
First Named Inventor	Cathy Johnson
Art Unit	3617
Examiner Name	Jesus D. Sotelo
Attorney Docket Number	50001/23006

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

24108

☒ Please change the correspondence address for the above-identified application to:

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OR

<input type="checkbox"/> Firm or Individual Name	Carlton Fields, P.A.				
Address	P.O. Box 3239				
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City	Tampa	State	Florida	Zip	33601-3239
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

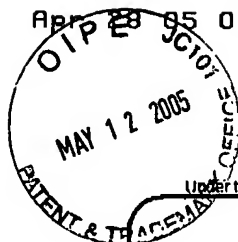
Name	Russ Jacob Post		
Signature			
Date	5-2-05	Telephone	239-731-0546

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 2 forms are submitted.

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CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/768,546
Filing Date	January 30, 2004
First Named Inventor	Cathy Johnson
Art Unit	3617
Examiner Name	Jesus D. Solelo
Attorney Docket Number	50001/23008

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Cathy Johnson		
Signature	<i>Cathy A. Johnson</i>		
Date	April 28 2005	Telephone	813-962-4793

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